## Case: 1:18-cv-02257-JG Doc #: 23-9 Filed: 04/15/19 1 of 1. PageID #: 590

## Farley, Karen

From:

Evans, Allison

Sent:

Friday, May 05, 2017 1:50 PM

To:

Kohlbacher, Georgene (gkohlba2)

Cc:

Farley, Karen; Fernandez, Laura; Reese, Jane (Litigation); Fulton-Royer, Jill

Subject:

RE f/u Debbie Moss

## Georgene-

My apologies for the delayed response. Yes, I was able to visit BCOA for a little while on Wednesday. I observed some group and 1:1 patient time. Again, I have not met with Deb to see her in the environment, but here are the observations I made.

It is a very dynamic environment that requires excellent situational awareness and attention to detail. All staff must be able to interpret the affect of multiple patients at once through facial expression and body language, be able to engage patients with various levels of arousal and react to emotional and physical distress. With limitations in these abilities, the safety and the quality of care for the patients is compromised. The group atmosphere adds to the complexity of this due to a higher level of activity and distraction in the room for both the employees and the patients, in addition to the fact that there can be as many as 10-12 people in the room at once. Employees must be able to respond to patients experiencing internal stimuli, those with communication and behavioral issues and patients that pose a safety risk due to fall or elopement risk.

In addition, according to the job description for a recreation therapist, group activities should include community, exercise and recreational tasks. While some groups can be completed with patients seated together in a circle format, others will need to involve more movement and physicality from the patients and the group leader. With that there is more risk for falls and increased awareness necessary for tracking patient movements and interaction.

While technology accommodations can facilitate success with documentation and gathering information on patients, aside from limiting all interaction to 1:1, which could still pose a risk, there is little that can be done to accommodate for the variability of a psychiatric patient population for someone with such significant vision deficits.

Please let me know if I can be of further assistance.

## Allison

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From: Kohlbacher, Georgene (gkohlba2) Sent: Thursday, May 04, 2017 2:56 PM

To: Evans, Allison



